

Collegium Registration 2016-2017

Upper Student Union Building – All Off-Campus Students Welcome!

1. Name: _____ **Biola ID:** _____

Phone: _____ BIOLA Email (print): _____

Birth Date (mo/day): _____ Did you transfer to Biola? Yes No

▪ **Year in School:** FR SO JR SR Grad **Gender:** F M

▪ Student Staff have access to this info for departmental purposes—to check for membership + celebrate your b.day! To keep this info private, ✓ here:

Please
Print

2. ➔ **MEMBERSHIP CHOICES**—Please ✓ One

Full Year Membership (Fall '16- Spring '17).....\$100

Per Semester

Fall 2016 Semester..... \$60

Spring 2017 Semester.....\$60

3. **PAYMENT OPTIONS:** (Please Check One)

Bill Membership Fee to my Biola Student Account.

(And start using the Collegium immediately—even before your 'Biola Bill' is paid off.)

Pay by Check: Please make checks payable to *Biola University*.

In the memo portion, please write “Collegium” and your name.

Pay by Cash: Please pay at the Collegium front desk in the Upper Student Union.

Ahmanson Veterans Scholarship Recipient - If you have previously been notified by Biola Financial Aid that you are a recipient of this scholarship, please check this box. Your Biola account will be billed, and then reimbursed for the amount of a Collegium membership.

➔ Questions about the scholarship? Contact Financial Aid: 562.903.4742; finaid.scholarships@biola.edu

4. Please ✓ before signing below:

“I have read the Collegium Guidelines, and signed the Community Agreement.”

(Please submit a signed copy of the Community Agreement with your Registration Form.)

SIGNATURE: _____ **DATE:** _____

Return signed Registration Form and Community Agreement to The Collegium (during the school year)
or mail to: Commuter Life, Biola University, 13800 Biola Ave, La Mirada, CA 90639.

FOR STAFF USE: Amount: \$ _____ = Account Billing; Check #: _____; Cash; Staff/Senator; Scholarship
Received by (staff name): _____; Receipt issued by (staff name): _____; (Entered in DB: (JA/JM only) _____)